

Montana Healthcare Programs Durable Medical Equipment Fee Schedule Explanation

CORRECTED - Proposed Effective July 1, 2023

The “Proposed July 2023 DME Services Fee Schedule” has been corrected. The previously posted proposed notice included outdated Medicare rates. Note, according to the [MLN Matters MM13235 | DMEPOS Fee Schedule: July 2023 Quarterly Update](#), there are no updates to the Medicare DMEPOS or PEN fee schedule rates for July 2023. The only codes on the Medicaid DME fee schedule that are subject to the provider rate increase are the codes listed with a method of “Fee Sched”. The remaining items are either reimbursed at 100% of Medicare or 75% of MSRP.

Definitions:

Modifier:

When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination. For example:

- 26 = professional component
- TC = technical component

Description:

Procedure code short description. You must refer to the appropriate official CPT-4 Professional, HCPCS or CDT coding manual for complete definitions to assure correct coding.

Effective

This is the first date of service for which the listed fee is applicable.

Method – Source of Fee Determination:

Note: If a valid, current code is not present, that code may be a non-covered service

Fee Sched: Medicaid fee; not determined using RBRVS payment schedule

Medicare: Medicare-prevailing fee.

MSRP: Manufacturers Suggested Retail Price (MSRP): Equals a percentage of billed charges based on MSRP or the provider acquisition cost (when no MSRP is available)

PA:

Prior Authorization

Y: Prior authorization is required by this code

Note: Prior Authorization required if item reimbursement is equal to or greater than \$1,000.00 or the MSRP is greater than \$1,334.00, even if the PA indicator indicated is "-"

Non-Rural Fee or Rural Fee:

The Medicare-prevailing fee that is applicable will be determined by the zip code in which the member resides.

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